FORM D 2004

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1250726
---------

OMB APPROVAL

OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ige burden
hours per respon	nse 16.00

SEC USE ONLY							
Prefix	1	Serial					
DA	DATE RECEIVED						

	·
Name of Offering ( Check if this is an amendment and name has changed, and indicate change.)	
Castle Canyon Townehomes, LLC Certificates of Participation	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	04008383
Castle Canyon Townehomes, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
76 Crestone Way, Castle Rock, Colorado 80104	303-472-7711
Address of Principal Business Operations (Number and Street, City. State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
Real estate development	BOOCECEEN
	PROCESSED  please specify): MAR 0 5 2004
Type of Business Organization	/ ~ anni-
	please specify): MAR 05 ZUUT
business trust limited partnership, to be formed LLC	
Month Year	THOMSON
Actual or Estimated Date of Incorporation or Organization: 0 6 0 2 Actual Est	imated FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	:
CN for Canada; FN for other foreign jurisdiction)	СО
GENERAL INSTRUCTIONS	

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission. 450 Fifth Street. N.W. Washington, D.C 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9



## BASIC IDENTIFICATION DATA Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years, • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(cs) that Apply: **X** Promoter Executive Officer Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) James Ricketts, Manager/Member of Castle Canyon Townehomes, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 76 Crestone Way, Castle Rock, Colorado 80104 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer General and/or Check Box(es) that Apply: Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

				В	. INFORM	ATION ABO	OUT OFFE	RING				
I Has th	a iccuar co	old or door	the issuer	intend to	sall to non	. agaradita	d investors	in this off	in and		Yes	No
1.1145 (11	.c 1880¢1 80	na, or aces							-	***********		X
Answer also in Appendix, Column 2. if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?									0.10	00		
Z. WHAT I	s the mini	mum mves	unieni inai	will be ac	cepted froi	n any mai	viduai?	• • • • • • • • • • • • • • • • • • • •		•••••		
3. Does th	he offering	g permit jo	int owners	hip of a si	ngle unit?						Yes	No
commis If a per	ssion or sir son to be l	nilar remur isted is an a	neration for issociated p	solicitatio erson or a	n of purcha gent of a br	sers in con oker or dea	il be paid on nection with the register register on to be list	h sales of s ed with the	ecurities in SEC and/	n the offeri or with a s	ing. tate	
				he informa	ation for th	at broker o	or dealer or	oly. 				
		ne first, if ir										
		Partners, L		nd Ctuant	City Chata	7:- Code						
			(Number a uite 400,									
		Broker or		Greenwoo	ou village	, Colorado	3 90111				<del></del>	
	10000111100	210.00	200.01									
States in '	Which Per	son Listed	Has Solicit	ed or Inter	nds to Solic	it Purchase	ers					
(Che	ck "All Sta	tes" or chec	ek individu	al States)							[ <i>F</i>	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[00]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[ IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[ RI ]	[SC]	[ SD]	[ TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	e (Last nam	ne first, if ir	idividual)							<del></del>		
Business	or Residen	ce Address	(Number a	and Street,	City, State	, Zip Code	)			<del></del>	<del> </del>	
Name of A	Associated	Broker or	Dealer			<del></del>	<u> </u>			· · · · · · · · · · · · · · · · · · ·		
States in V	Which Per	son Listed	Has Solicit	ed or Inter	nds to Solic	it Purchase	ers					
(Chec	ck "All Sta	tes" or chec	k individua	il States)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[ IN ]	[ IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]		[NC]		[OH]	[OK]	[OR]	[PA]
[ RI ]	[SC]	[ SD]	[ TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	c (Last nam	ne first. if in	idividual)		<u> </u>							
Business	or Residen	ce Address	(Number a	and Street,	City, State	, Zip Code	)	······				
						•		<u> </u>				4
Name of A	Associated	Broker or	Dealer						*			
States in '	Which Per	son Listed	Has Solicit	ed or Inter	nds to Solic	it Purchase	ers			<del></del>		
(Che	ck "All Sta	tes" or chec	ck individu	al States)			·····		·····			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[ IN ]	[ IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[ RI ]	[SC]	[ SD]	[ TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[ PR]

# OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u>\$ 2,231,000</u>	\$_2,231,000
	Equity	§ 0	\$ 0
	Common Preferred		
	Convertible Securities (including warrants)	\$ 0	S 0 ·
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3. if filing under ULOE.	<u> </u>	ψ <u></u>
2. 1	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "O" if answer is *'none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors.	16	§ 2,231,000
	Non-accredited Investors.	0 .	\$ 0
	Total (for filings under Rule 504 only)	n/a	S_n/a
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	n/a	<u>S_n/a</u>
	Regulation A	n/a	<u>S_n/a</u>
	Rule 504	n/a	S_n/a
	Total	n/a	S_n/a
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		S0
	Legal Fees.		§ 35,000
	Accounting Fees		S0
	Engineering Fees		S0
	Sales Commissions (specify finders' fees separately)		§ 111,550
	Other Expenses (identify) trustee fees	<del></del>	\$ <u>590</u>
	Total	-	S 147,140

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part CQuest and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted proceeds to the issuer."	i gross	§ 2,083,860
Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be use each of the purposes shown. If the amount for any purpose is not known, furnish an estimat check the box to the left of the estimate. The total of the payments listed must equal the adjusted proceeds to the issuer set forth in response to Part CQuestion 4.b above.	e and	
	Payments to Officers. Directors, & Affiliates	Payments to Others
Salaries and fees	[] \$ <u>0</u>	\$_0
Purchase of real estate		_ <u></u>
Purchase, rental or leasing and installation of machinery and equipment		\$0
Construction or leasing of plant buildings and facilities	<del></del>	_ 🗀 \$ 0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	— □ \$ 0	
Repayment of indebtedness		
Working capital	<del></del>	_
Other (specify): Interest Payments		
Column Totals		<u>\$ 2,083,860</u>
Total Payments Listed (column totals added)		,083,860
D. FEDERAL SIGNATURE		
the issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this ignature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comments in the Exchange of the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2)	ommission, upon writte	ule 505, the following en request of its staff,
ssuer (Print or Type) Signature	Date	
Castle Canyon Townehomes, LLC	February 10, 2	004
ame of Signer (Print or Type)  Title of Signer (Print or Type)		
ames Ricketts Managing Member		

-----ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C.1001.)

		E. STATE SIGNATURE							
1.	. Is any party described in 17 CFR 230.262 presprovisions of such rule?		Yes No						
	See A	appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to fun D (I 7 CFR 239.500) at such times as required by	·	nich this notice is filed a notice on Form						
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	uer has read this notification and knows the content thorized person.	ts to be true and has duly caused this notice to be	signed on its behalf by the undersigned						
Issuer (P	Print or Type)	Signature	Date						
Castle	Canyon Townehomes, LLC	James D. Litett	February 10, 2004						
Name (P	Print or Type)	Vitle (Print or Type)							
James	Ricketts	Managing Member							

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
	Intend to non-a	I to sell coredited s in State Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and  amount purchased in State  (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL							·		
AK	···								
AZ									
AR									
CA									
СО		X	Certificates of Participation	16	2,231,000	0	0	-	X
CT	<u> </u>								
DE									
DC									
FL									
GA									
HI							<del></del>		·
ID									
IL									
IN									
IA				/				ļ	
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS	<u>.                                    </u>								

				APPI	ENDIX				
	Intend to non-a	to sell ccredited s in State Item I)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ				r		:			
NE									
NV									
NH									
NJ									
NM									
NY									
NC							· · ·		
ND									
ОН									
ок							-		
OR									
PA									
RI	The state of the s								
sc	grade	topoge of the	Section 1	To delighe the control of the contro	COMPANIES OF THE STREET				
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									

	APPENDIX											
į		2	3		4							
	to non-a	to sell ccredited s in State Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY												
PR						·						